

CERRO COSO COMMUNITY COLLEGE

Concurrent Student Release

Fall 20_____

Spring 20_____

Summer 20_____

THIS PROCEDURE MUST BE FOLLOWED EACH SEMESTER:

1. Complete the Cerro Coso Application or Update form online;
2. Obtain approval from high school counselor or administrator;
3. Obtain approval from parent or guardian;
4. Take this completed form to the Cerro Coso counseling office for approval.
5. Fax: 760-384-6255

NO CLASS MAY BE TAKEN, OR CLASS CHANGES MADE WITHOUT THE APPROVAL OF A COLLEGE COUNSELOR OR EDUCATIONAL ADVISOR. ANY CHANGES TO CLASS(ES) SELECTION MUST BE APPROVED BY HIGH SCHOOL & CERRO COSO.

FOR STUDENT/PARENT COMPLETION (Please fill in appropriate blanks with ballpoint pen.)

Student's Name (Last, First, M.I.)	Student ID # @
Birthdate	Phone Number
Street Address	City, State, Zip

By enrolling in a college level class, you are agreeing that YOU will be responsible for communicating with your instructors, studying at least two hours for every hour of class (minimum), turning in college level assignments complete and on time, and purchasing all textbooks within the first week of class. If you are uncertain about carrying out any of these responsibilities, a college class may not be the best option for you at this time. Minor students and their parents/guardians understand that they are enrolling in college class, which are designed with adults in mind. The atmosphere of the campus in general, and of classrooms in particular, will reflect an adult population. Please contact a college counselor if you have any questions.

Cerro Coso enrollment fees of \$46/unit are waived (up to 11 units) for K-12 students. Nonresident tuition will apply if the K-12 student is an international student, not a US citizen, not a California resident, or has not lived in California for one year and one day prior to enrolling at Cerro Coso. There will be a \$1 Associated Student Body Fee for all students, including concurrent students.

I agree to the above and to abide by all the rules and regulations of Cerro Coso Community College, and authorize the release of academic and Code of Conduct information to the high school. I hereby release Cerro Coso Community College from any and all liability or damages for providing the information requested.

Student's Signature _____ Date _____

Parental Approval _____ Date _____

FOR SCHOOL OFFICIAL COMPLETION

Name of School _____

School Address _____

Grade: (indicate one) 9 10 11 12 Adult School G&T GPA _____

College Course Requested	Course Reference Number CRN	Units	College Credit	HS Credit	Initial of HS Official

Comments/Exceptions*: _____

*If an exception to the 2.75 minimum G.P.A. is felt to be appropriate, the school official must explain the reason.

As Designated School Official, I recommend that this student be permitted to take the college degree applicable classes indicated above. I certify that I have not recommended over 5% of students from any grade level to Cerro Coso College during the summer semester.

Release Approval _____ Date _____
Signature of School Official Title Contact Number

FOR COLLEGE COMPLETION ONLY

Approved Disapproved

Counselor's Signature _____ Date _____

Comments _____

Course Credit Transferred _____ Date _____
College Registrar